## **REVISED APRIL 30, 2009**



# REQUEST FOR QUALIFICATIONS (RFQ) & EXPRESSIONS OF INTEREST CONSULTING SERVICES

(29 Del.C. §6981)

## Agreement No. 1502

#### LOGO SIGNING PROGRAM

#### PROJECT DESCRIPTION

#### 4/30/09 REVISED RFQ

The required submission date has been changed from May 6 to May 21, 2009.

The purpose of this procurement is to obtain consultant services to perform all necessary tasks in the recruiting, screening, and qualifications of businesses; fabrication, installation and maintenance of signs; and the general management of the logo program under the rules and guidelines as issued by the Department. This Agreement will be for a five (5) year term.

The Logo Program is contained to limited access highways only in the State of Delaware. The current eligible roadways for this program include: I-95, I-295, I-495, and SR 141 in New Castle County, and SR1 in New Castle and Kent Counties.

This program must meet the requirements outlined in the most current Delaware Department of Transportation Manual on Uniform Traffic Control Devices for Streets and Highways (MUTCD).

#### CONSULTANT SERVICE REQUIREMENTS

The major program requirements include, but are not limited to, the following:

- All administration, marketing, construction, and maintenance activities shall be
  performed in accordance with the applicable laws, DelDOT regulations, policy, and
  current construction specifications applicable to signing and work associated with
  sign installation, special provisions, sign standards, MUTCD, DelDOT Work Zone
  Safety requirements and this document.
- The Consultant shall maintain an office and/or toll free phone line for Delaware-based businesses. The office serving the Delaware program shall be sufficiently staffed and equipped to maintain all phases of the program for the life of the agreement. At a minimum this office shall be staffed eight hours per day, Monday through Friday. The office may be closed on official state holidays. The consultant must also provide a 24-hour emergency contact, location and phone number to the Department.

- The Consultant shall conduct routine and emergency sign maintenance on all logo signs. Repairs shall be completed within 48 hours of receipt of report of need. All associated costs are the responsibility of the consultant.
- The consultant must have the sign marketing effort completed within three months of award and the sign installation process underway within six months of award.

## **PARTICIPATION FEES**

#### **COMPENSATION**

- The annual fee that the consultant charges to businesses for participation in the program shall constitute the sole compensation for the consultant from the participating businesses for services performed and materials used in displaying the logo panels of those businesses.
- There shall be no additional compensation to the consultant from the prospective businesses for installing, maintaining, relocating or removing logo panels.
- Each business participating in the program is required to furnish, at its own expense, logo panels from a source of their choosing. The consultant may, at its option, provide such services and charge appropriate fees to the businesses for its services.

#### ANNUAL FEE

- An annual fee for participation in the program shall be established by the consultant, and the fee amount accepted by the Department and the Delaware Tourism Office. This fee shall remain throughout the term of the agreement. This fee must be determined and approved prior to execution of the agreement between the consultant and the Department.
- The annual fee amount awarded shall be based on the display of one logo panel on a background sign on the mainline roadway in one direction of travel. There shall be no additional fees charged for the display of a business logo ramp and trailblazer signs associated with the mainline logo display.
- The annual fee amount or multiples thereof shall be the total cost of participation in the program to each business. The fee, therefore, should be calculated to include all costs for providing logo signing services and may include the Department's costs for program administration.

#### **ADMINISTRATIVE GUIDLEINES**

• The minimum state criteria for participation in the logo program shown in "Attachment A" have been established by the Department and the Delaware Tourism Office. The minimums may not be changed except by resolution of the two state Departments.

- All businesses shall be in full compliance with the minimum state criteria for their type of business prior to acceptance into the program and shall remain in full compliance with the criteria, rules and regulations of the program at all times while they are participants. If a business is not in full compliance with the criteria at the time they are interviewed as a potential participant but indicates a willingness to make appropriate changes to their operation in order to qualify, the space available on the background sign shall be held in reserve for a period not to exceed 30 days while the business accomplishes such changes.
- A business may terminate its participation in the program at any time. The consultant shall not be obligated to refund any fees paid, or portions thereof, because of voluntary termination of participation by the business, for any reason, prior to the end of a full year of participation.

As part of the agreement between the consultant and participating businesses, there shall be statements included, but not limited to:

- That the business complies with all applicable laws concerning the provision of public accommodation without regard to race, religion, color, sex, national origin, or accessibility by persons with disabilities.
- That the business complies with the rules, regulations, and eligibility criteria of the program.
- Provisions to allow the consultants or the Department or the Delaware Tourism Office
  personnel to review and inspect the business for compliance with the rules, regulations,
  and eligibility criteria.

The consultant shall submit semi-annual reports to the Department and the Tourism Office by the end of the months May and October. The fourth quarter report shall include information for the six month period and a summary of activities reported during the year.

#### SUBMISSION REQUIREMENTS

1. Expression of Interest submissions must be received by: 3:00 P.M. Local Time, Wednesday, May 6, 2009. THURSDAY, MAY 21, 2009.

Facsimile responses to this Request for Expressions of Interest are not acceptable. No response hand-delivered or otherwise will be accepted after the above date and time. Expressions of Interest arriving after the deadline will be rejected regardless of the reason for late arrival. DelDOT's time is considered the official time for determining the cut-off for accepting Expression of Interest submissions. Firms wishing to be considered for work on this project must submit statements expressing interest as set forth herein. Any variation, including additions, is considered a basis for rejection. Expressions of Interest are to be mailed or delivered to:

James Hoagland, Contract Services Administrator Contract Administration Delaware Department of Transportation 800 Bay Road, Dover, DE 19901 2. Specific Type Firm Solicited:

There is no pre-registration requirement in order to submit an expression of interest on this project. The selected firm(s) may be required to register upon selection.

- 3. The Consultant shall submit six (6) copies of an Expression of Interest. Receipt of insufficient copies of the Expression of Interest and non-compliance with providing the requested information in the desired format may result in elimination from the overall shortlist and selection process.
- 4. Joint venture submissions will not be considered.
- 5. **DelDOT reserves the right to reject** any and all Expressions of Interest. All submissions become property of the Delaware Department of Transportation and shall be retained for a period not to exceed 30 days from the date of the approved shortlist. DelDOT reserves the right to any and all ideas included in this response without incurring any obligations to the responding firms or committing to procurement of the proposed services.

### **RATING CRITERIA**

Major factors/criteria for the establishment of a reduced candidate/shortlist and selection:

- a) Your firm's approach to soliciting the business
- b) Your firm's prior experience in the logo sign area
- c) Three professional references
- d) Review of submitted Internal Control Questionnaire

**NOTE:** DelDOT maintains a strict policy of not providing a debriefing for those candidates that do not make the shortlist. If a firm is not included in the Shortlist, it does not indicate they are not qualified, it is an indication the Shortlist Committee determined others appeared to be more qualified based on the information submitted. Shortlist and Selection Committee membership appointments are confidential.

#### **QUESTIONS**

Questions regarding this RFQ should be submitted via email. Questions received and the Department's response will be provided on the Department's web site; <a href="http://www.deldot.gov/">http://www.deldot.gov/</a>. Click on 'Doing Business', under 'Professional Services', click on 'Current Requests for Consulting Services'.

#### **CONTACTS**

<u>Questions concerning submissions and procedures</u> may be obtained from: James Hoagland, Contract Services Administrator, Telephone: (302) 760-2036. E-mail address: jim.hoagland@state.de.us.

#### **OVERVIEW OF SELECTION PROCESS**

The Selection Committee shall decide among the following processes for selection:

The Expressions of Interest may be used to determine a reduced candidate's list/short list and also will be used for reference material during the actual selection process. If a short list has been determined, a mandatory pre-proposal meeting may be established for a briefing and provides an opportunity for the short-listed candidates to ask questions. Once the Pre-proposal Meeting has been completed, there may be a written submission and/or oral interview sessions scheduled, after which the committee will determine the successful candidate.

## **EXPRESSION OF INTEREST REQUIREMENTS**

The letter portion of the Expression of Interest shall indicate the firms desire to perform services and indicate any specific tasks or areas of expertise which will be subcontracted, and to whom. Interested firms must submit the material required herein or they will not be considered for the project.

- 1. Please submit the firm's mailing address, phone number, and an e-mail address for the firm's point of contact person on page 1 of the Letter of Interest. Future contacts by the Department will be done via e-mail whenever possible.
- 2. The Expression of Interest submission should be tabbed and collated in the following order:

#### A. Table of Contents

Table of Contents (1 per set) - Limited to One (1) page on 1 sheet of paper

#### **B.** Letter of Interest

- (1) An understanding of the anticipated assignments, services required, and approach to providing the services required
- (2) Identify who the proposed project manager will be and what office location they will be working from.
- (3) The location, size, and description of the firm
- (4) Availability of personnel for immediate placement
- (5) Sub-consultant usage if anticipated. Indicate the percentage of work estimated to be performed by the sub vs. the prime. Also, indicate if the prime consultant has previously worked with the proposed sub and give a brief example of the previous relationship(s).

#### C. Company Information

Submit the following packet of information titled "Company Information" to include:

- (a) Name of entity and address.
- (b) Address of office where work will be performed.
- (c) Resumes for 6 key persons (6-single sided sheets of paper for resumes 1 resume on each sheet). Indicate if the individual is a full-time member of your firm, part-time, on-call, etc. Indicate where key personnel are currently assigned & the length of the assignment. Clearly identify who will be the Project Manager.
- (d) List 5 projects that your firm has participated in within the last 3 years that are similar to the requirements in the Project Description portion of this Request for Qualifications. Include project name & location, nature of responsibility, contracting agency & address on one-single sided sheet of paper maximum for each project.
- (e) Complete as much of the attached "Internal Control Questionnaire" as possible.
- (f) Additional information you would like to submit is limited to 1-single sided sheet of paper.

#### D. References

Provide a list of References who have personal knowledge of the prime consultant's and the sub-consultant's previous performance. Provide three (3) client references each for both the prime and the sub-consultant(s). The references must include **verified** addresses and telephone numbers, contact persons, and a brief description of services that have been provided similar to those for this project.

(1) References shall be shown on separate sheets (limited to one (1) single-sided sheet; one sheet for the prime and one sheet for each sub proposed). These shall not be included in the four page Letter of Interest.

No promotional materials or brochures to be included as part of the Expression of Interest package.

The Department is not liable for any cost incurred by the consultant in the preparation or presentation of the Statement of Qualifications.

The Department of Transportation will affirmatively insure individuals and businesses will not be discriminated against on the grounds of race, creed, color, sex, or national origin in consideration for an award. Minority business enterprises will be afforded full opportunity to submit bids/proposals in response to this invitation.

Department of Transportation State of Delaware By: Carolann Wicks, P.E. Secretary Dover, DE April 6, 2009

## LOGO SIGNING PROGRAM

## MINIMUM REQUIRED SERVICES

GAS

1 mile distance

Fuel gas/diesel

Oil and water (and information On tire/repair services)

Clean public restrooms

Public telephone

Open 14 hours per day/ 7 days per week

**FOOD** 

3 miles distance

Open 7 days per week/ 12 hours per day

3 meals/day

Public telephones

Seats 10 or more

Approved state health and business Licenses and certificates on display

**LODGING** 

3 miles distance

Open year round/Open for check-in 7 days per Week/24 hours per day

Approved state health And business licenses Certificates on display

## DELAWARE DEPARTMENT OF TRANSPORTATION AUDIT SECTION INTERNAL CONTROL QUESTIONNAIRE

Company	Information
Date:	Prepared By:
Firm's E.I.N. N	No.:
Name of Firm:	
Address:	
Telephone No.	Fax No.
Web Site/Emai	il Address:
Type of Organ	ization:
***************************************	Corporation
	Closely Held Family Publicly Held
	Names and Titles of Corporate Officers
***************************************	Partnership
	Partner's Names and ownership %:
***************************************	Division of:
***************************************	Other Type of Organization:
f there have be	een no changes since your previous questionnaire submission please sign and return:
Signature:	Date:

Estimated breakdown of labor force:
Number of employees working on billable projects:
Number of administrative employees/non-billable:
Annual Sales/Expenditures (Most recent complete fiscal year): \$
What is your fiscal year/accounting period?
Financial Information and Processes
Preparer of Firm's Financial Statements:
Does the firm prepare an indirect cost/overhead schedule?  Yes. Please forward most recent copy, and sign and return the attached letter allowing your CPA/Accountant to provide their work-papers related to their report.
No.
Indicate the method used to determine the overhead derivation:
CashAccrual
Please indicate the name of the State, Municipal, or Federal agency that has recently audited your
Attach a copy of that report. Also, sign and return the attached letter allowing that <i>government</i> agency to release their work-papers related to their audit.
Identify all:  a) affiliated firms
b) immediate family members of senior management or a principal shareholder with whom your firm has entered into contracts or done at lease \$10,000 in business within the past 12 months.
List all parties doing business with your firm who are or have been recipients of loans extended by any of the consultant's principal shareholders or senior management.
Is there any property or equipment owned by partners/corporate officers or other close relationship, which is leased to the firm?

Yes No		
yes, please explain the relationship.		
Vhat written procedures and policies do y	ou maintain?	
Accounting		
Personnel		
Other		
s the accounting system computerized or	manual?	
f accounts are computerized, what softwa		e when?
What basis of accounting are you on?		
Cash		
Accrual		*
Modified Accrual, if yes expla	iin	
What reports do you generate and how oft	ren?	
	Monthly	Yearly
A. General Ledger  3. Cash Disbursements		
C. Cash Receipts D. Payroll Register		***************************************
E. Project Cost  Direct/Indirect Labor Report  Other		100000000000000000000000000000000000000
Low often are reports reconsiled? Who re	conciles?	
How often are reports reconciled? Who re	conclies:	

Is a Job Order Cost Accounting s If yes, are there separate direct ar Disbursements Journals?	ystem in use? ad indirect ac	Yes counts in the Gen	No eral Ledger and Purchases or Cash
Yes No			
			0.15
Is your cost accounting system in	egrated with	your financial ac	counting system? It so, explain.
Identify any expense that was increturn for, or as an inducement for	urred in wholor, any other	e or in part as an business with you	accommodation to any party in or with any of your affiliates.
Which of the following expenses a			
Employee personal mileag	e & travel exp	enses	Yes No
Rates Applied: Mileage:	. Account to the second	•	
Travel Expenses:			
Company Car Mileage	Yes	No	Rate:
Xerox Copies	Yes	No	Rate:
Prints & Reproductions	Yes	No	Rate:
Attach ra	nte schedule fo	r in-house charges	S
Telephone	Yes	No	
Computer	Yes	No	
If yes, at	tach documen	tation used to deve	elop the billing rates.
What advertising expenses do you	incur and to	what accounts a	re these expenses charged?

List any income or expense account item carried elsewhere than on the general ledger income or expense records.		
Are all jobs costed consistently, even if they cannot be billed directly? Explain.		
Are direct costs identified on lump sum jobs?YesNo  Do you maintain any Cost Centers (ie. A separate cost pool for CADD)? What are they?		
In distributing labor, please explain the system used by the firm.		
Approximately, what percentage of your business is governmental versus private?		
Is the company beneficiary of life insurance policies on key personnel?		
Do all company personnel prepare time sheets?		
Do the principals and secretarial staff charge time directly to all projects? If yes, approximately what is the percentage of direct versus indirect?		
Is all time worked reported? Is time charged directly to all projects regardless of type or status of a contract?		
Can or is the payroll register reconciled to the general ledger (accounting system) and also to the cost accounting system?		
Are the time sheets reviewed by a second person and signed by this reviewer?		

Does the firm use contract labor and how is this labor accounted for?
Does the firm use temporary labor? What is the percentage versus full-time? Is there a reduced overhead rate for such labor?
Does the company have a written bonus policy?
Do employees continue to charge time to jobs on which the firm has incurred an overrun?
Yes No
What is the company's policy for overtime hours and pay for salaried individuals?
List the names of any officers and employees, working on a day-to-day basis in the area of accounting who, during the last 24 months, did not remain absent from their duties for a minimum of 10 continuous working days during any fiscal year.
If you have been a defendant in any suits in law or equity in the past 12 months, give the names of the plaintiffs, amounts sued for, and nature or basis for litigation.
Identify any personal benefit in excess of \$50 per year to any employee given by any company, or employee of any company doing business with you.

Give the or who is trust.	name of any director, officer or employee who has in the past 24 months been convicted of s presently under indictment for any criminal offense involving dishonesty or a breach of
Identify	any personal benefit in excess of \$25 per year given by you or one of your affiliates to any e of a government agency substantially involved with any business of yours.
Please a	ttach the following
	Copies of current financial statements
	Chart of Accounts
	Organizational Chart (including lines of authority)
	Most recent audited Overhead/Indirect Report (include written permission to contact auditing agency about overhead audit)
	Federal Tax Return for the most recent two years
	Current labor rates
	Written bonus policy
	Travel Policy